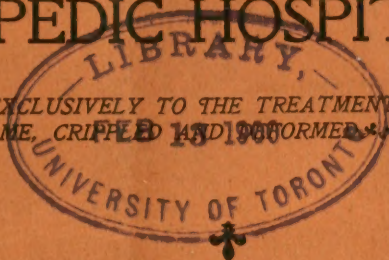


TORONTO ORTHOPEDIC HOSPITAL

DEVOTED EXCLUSIVELY TO THE TREATMENT
OF THE LAME, CRIPPLED AND DEFORMED



First Annual Report

CONTAINING ALSO GENERAL INFOR-
MATION REGARDING THE HOSPITAL
AND ITS EQUIPMENT



Rules and Regulations

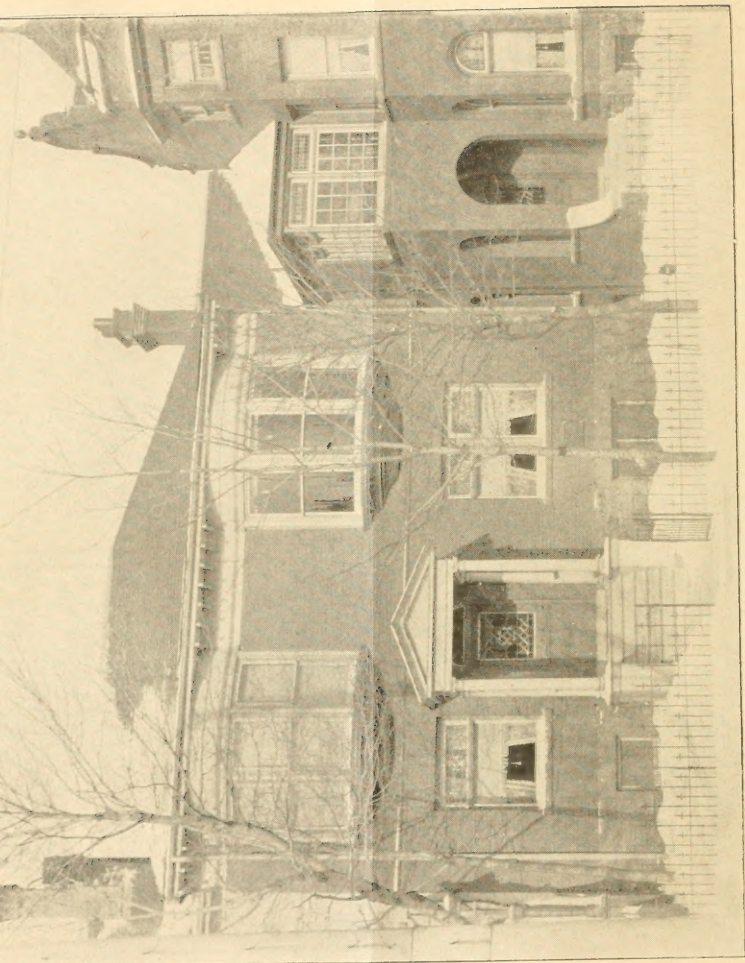


Address all Communications :

TORONTO ORTHOPEDIC HOSPITAL

12 East Bloor Street, Toronto.





TORONTO ORTHOPEDIC HOSPITAL. (*Taken in winter.*)

Biological
& Medical
Serials

Toronto Orthopedic Hospital.

BOARD OF TRUSTEES:

| | | |
|---|---------------------------------------|-----------------------|
| REV. JOHN POTTS, D.D., Secretary of Education, The Methodist Church, | } | <i>President</i> |
| J. J. FOY, Q.C., M.P.P., | - - - - - | <i>Vice-President</i> |
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| LT.-COL. JOHN I. DAVIDSON, Pres. The Davidson & Hay, Limited | | |
| REV. JOHN GILLESPIE, | - - - Rector, Church of the Messiah | |

SOLICITOR:

ALFRED W. BRIGGS, ESQ.

LADIES' COMMITTEE:

| | | |
|---|-----------|---------------------------|
| MRS. JOS. E. MACDOUGALL, 121 Carlton Street | - - | <i>President</i> |
| MRS. T. EATON, 182 Lowther Avenue | - - | <i>1st Vice-President</i> |
| MRS. B. B. HUGHES, 434 Jarvis Street | - - | <i>2nd Vice-President</i> |
| MISS FOY, 188 Jarvis Street | - - - - - | <i>Secretary</i> |
| MRS. WELLINGTON BOGART, 34 Sussex Avenue | - - | <i>Treasurer</i> |

MRS. JOHN POTTS, 8 Prince Arthur Avenue.
MRS. W. G. FALCONBRIDGE, 80 Isabella Street.
MRS. JOHN GILLESPIE, Avenue Road.
MRS. CHESTER D. MASSEY, 519 Jarvis Street.
MRS. J. W. FLAVELLE, 565 Jarvis Street.
MRS. BENJAMIN LLOYD, 68 Spadina Road.
MRS. L. LORAN PALMER, 40 College Street.
MISS CASSIDY, 310 Church Street.
MRS. T. W. HORN, 180 St. George Street.
MRS. H. B. SOMERS, 3 Bellevue Place.
MRS. PRICE BROWN, 31 Carlton Street.
MRS. C. E. RYERSON, 27 Cecil Street.
MRS. A. CARMAN, 53 St. Vincent Street.
MRS. THOS. LONG, 513 Jarvis Street.
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MRS. PATRICK HUGHES, 29 North Street.
MRS. H. S. MARA, 539 Jarvis Street.
MISS AMY L. SANDERSON, 299 Huron Street.
MRS. H. P. H. GALLOWAY, 14 East Bloor Street.

Toronto Orthopedic Hospital.

MEDICAL STAFF.

CONSULTING STAFF.

Consulting Surgeons:

DR. L. M. SWEETNAM. DR. J. H. COTTON.
DR. S. M. HAY.

Consulting Physicians:

DR. A. MCPHEDRAN. DR. W. J. WILSON.
DR. W. J. FLETCHER.

Consultant on Diseases of the Eye and Ear:

DR. L. LORAN PALMER.

Consultant on Diseases of the Throat and Nose:

DR. PRICE BROWN.

Anesthetist:

DR. R. A. STEVENSON.

Pathologist:

DR. GEO. H. CARVETH.

ACTIVE STAFF:

DR. B. E. MCKENZIE. DR. H. P. H. GALLOWAY.

LADY SUPERINTENDENT:

MISS L. E. APPLGATH.

Toronto Orthopædic Hospital.

THE FIRST ANNUAL REPORT.

The trustees of the Toronto Orthopædic Hospital beg to present the following annual report :—

This report embraces a period of fifteen months, beginning with the opening of the hospital on July 1st, 1898, and ending with the date of termination of the Government year for hospitals, September 30th, 1899. Future reports will present the work of twelve months only.

The trustees regard with reasonable pride and with no small degree of satisfaction the rapid growth of an institution which, beginning in a very modest way, has within the brief period of fifteen months made a record of successful progress quite exceeding their highest expectations. Owing to the fact that the work of the hospital is limited to a single branch of surgery, it was naturally expected that only a comparatively small number of beds would be required at any one time; but the pressing need of an institution devoted exclusively to the care and treatment of the lame, crippled and deformed, was shown almost at once by a demand for accommodation quite beyond what had been provided. This difficulty has recently been met by more than doubling the original capacity.

In view of its history to the present time, the trustees feel justified in believing that when the Toronto Orthopedic Hospital was opened the foundation was laid of a worthy and much needed institution, which has before it a long career of ever enlarging usefulness.

As soon as the work of organization was completed the trustees applied to the Ontario Government for recognition of the hospital as a public institution. In response to this request the hospital was officially visited by the Government Inspector, Dr. T. F. Chamberlain, who warmly commended the work that was being undertaken. His recommendation to the Government was favorably received, and the hospital was placed on the list of public institutions which receive a grant to aid in carrying on charitable work.

A large number of those admitted to the hospital have been private or semi-private patients; but its recognition by the Government and the donations of friends, have made possible the care and treatment of a considerable number of public patients who were sorely in need of help, but unable to pay for it.

It is the hope of the trustees to be able to finance the affairs of the hospital so as to be ready to receive, at all times, patients who have a legitimate claim to charitable treatment. It is intended, however, to proceed cautiously, and to provide increased accommodation only as the demand arises. Every indication, however, points to the fact that if the hospital is to realize its full possibilities of usefulness, plans for pursuing the work on a much more extended scale must soon come up for serious consideration; and it is believed that amongst the large circle of friends which

is rapidly forming, there will be found some whose interest in a field of work hitherto so much neglected in Canada will find expression in the provision of buildings and equipment of sufficient extent to meet every possible demand.

Following out an intention, present from the time of organization, that one use of the hospital should be the promotion of the study and teaching of Orthopedic Surgery, clinical lectures are given in the hospital gymnasium every Monday at 1.30 p.m., except during the summer months. In addition, a large number of medical practitioners have availed themselves during the year of the opportunity of witnessing the various operations of orthopedic surgery which have been performed in the hospital, and the staff have received many expressions of warm appreciation of this privilege.

The wide area to which the usefulness of the hospital extends is best shown in the table, which appears in another part of this report, giving the various places from which patients have thus far been received for treatment. From this it will be seen that, besides those residing in Toronto, patients have come from seventy-two different cities, towns and villages of Canada and the United States.

The trustees desire to thank all who have in any way shown an interest in the hospital or contributed in any degree to the success thus far enjoyed, and they look forward with much pleasure to the increased usefulness of the institution, which it is confidently believed will be the experience of the future.

JOHN POTTS,

President Board of Trustees.

TREASURER'S STATEMENT OF INCOME AND
EXPENDITURE.*

Receipts.

| | |
|--|------------|
| Received from patients for maintenance and nursing | \$2,538 72 |
| Cash donations | 47 00 |
| Other sources | 15 80 |
| | \$2,601 52 |

Expenditure.

| | |
|---|------------|
| Food supply | \$482 01 |
| Medical and surgical appliances, and surgical instruments | 196 26 |
| Drugs and medicines | 62 59 |
| Bedding, napery and general housefurnishings | 394 05 |
| Salaries and wages | 438 84 |
| Brooms, brushes, soap and cleansing appliances | 14 88 |
| Fuel, light and water | 162 26 |
| Contingencies | 823 14 |
| Balance | 27 49 |
| | \$2,601 52 |

WARRING KENNEDY,

Treasurer.

Audited and approved,

(Signed) A. C. NEFF, F.C.A.

* This Statement does not include the income and expenditure in connection with the mechanical department and the gymnasium. The expense of carrying on these two features of the hospital work is at present over \$3,000 per year.



IN THE GYMNASIUM, TORONTO ORTHOPEDIC HOSPITAL. CORRECTIVE FORCE IN
THE TREATMENT OF SPINAL DEFORMITY.



CLASS IN CORRECTIVE GYMNASTICS, TORONTO ORTHOPEDIC HOSPITAL.

Medical Report.

| | |
|--|-------|
| Number of admissions | 172* |
| Number discharged | 156* |
| Patients remaining in the Hospital at the close of year. . | 16 |
| Collective days' stay of patients in hospital | 3,306 |
| Average days' stay per patient | 19.22 |

Age and Sex of Patients.

Of the 172 patients admitted 100 were under, and 72 over, 14 years of age ; 98 were males and 74 females.

Classification of Diseases for which Patients were admitted.

| | |
|--------------------------------|----|
| Ankylosis of knee | 1 |
| Ankylosis of jaw. | 1 |
| Ankle-joint disease | 4 |
| Bow legs | 3 |
| Club-foot, congenital. | 37 |

These figures refer to the number of admissions and discharges as shown by the Hospital Register. In some cases of severe deformity the same patient requires more than one operation, but is well enough to spend part of the interval between the operations at home. Each admission and discharge in such cases necessarily appears on the Hospital Register.

| | |
|--|----|
| Club-foot, flat-foot, and other deformities of feet and limbs due to paralysis (except spastic paralysis) | 32 |
| Congenital dislocation of hip | 6 |
| Deformity from cancer of femur | 1 |
| Deformity of tibia, congenital | 1 |
| Deformity of ears | 1 |
| Deformity from osteo-arthritis | 2 |
| Elbow-joint disease | 2 |
| Flat-foot, non-paralytic | 2 |
| Hip-joint disease | 29 |
| Knee-joint disease | 12 |
| Knock-knee | 3 |
| Lateral curvature of spine | 9 |
| Necrosis of radius | 1 |
| Neuro-mimetic spine | 1 |
| Neuro-mimetic knee-joint | 1 |
| Pigeon-breast deformity | 1 |
| Pott's disease of the spine | 8 |
| Round shoulders | 1 |
| Sciatica | 1 |
| Spastic paralysis | 9 |
| Torticollis | 1 |
| Toxic infection | 2 |

172

Surgical Operations.

The number of surgical operations performed was 174. This includes only operations of sufficient severity to require the use of a general anesthetic, operations and dressings not requiring to be done under ether or chloroform not being counted.

Conditions for which Operations were performed.

| | |
|--|----|
| Ankle-joint disease | 3 |
| Ankylosis of knee | 1 |
| Ankylosis of jaw | 1 |
| Bow-legs | 2 |
| Club-foot, congenital | 59 |
| Club-foot, flat-foot, and other deformities of feet and limbs due to paralysis (except spastic paralysis) | 30 |
| Congenital dislocation of hip | 7 |
| Deformity from cancer of femur | 1 |
| Deformity of ears | 1 |
| Deformity of toes | 2 |
| Deformity of tibia | 1 |
| Deformity from spastic paralysis | 10 |
| Deformity from osteo-arthritis | 1 |
| Elbow-joint disease | 3 |
| Flat-foot, non-paralytic | 2 |
| Hip-joint disease | 23 |
| Knock-knee | 4 |
| Knee-joint disease | 14 |
| Necrosis | 1 |
| Pott's disease of spine | 1 |
| Torticollis | 1 |
| Operations other than orthopedic, performed by members of the Consulting Staff or under their direction | 6 |

174
Out-patients.

In addition to those admitted to the hospital wards, a considerable number of cases have been treated as out-patients.

Gymnasium Patients.

Only a very small proportion of the patients who are under treatment by means of Orthopedic Gymnastics

require to reside in the hospital, consequently this important department of the hospital work is barely represented in the figures given above. The number of patients in regular attendance at the various classes in the gymnasium varied from twelve to twenty-five daily.

Deaths.

Thus far only one death has occurred in the hospital.

Freedom from Infectious Diseases.

The medical staff gratefully record the fact that thus far not a single case of infectious disease has occurred in the hospital. When it is considered how seriously such an outbreak would interfere with the usefulness of an institution, the work of which is purely surgical and confined to a class of patients who, though lame, crippled or deformed, are usually otherwise in good health, it is not difficult to appreciate the satisfaction with which the entire immunity from infectious disease thus far experienced is viewed by both Trustees and Staff.

Consulting Staff.

The active staff desire to acknowledge with gratitude the valuable service rendered on a number of occasions by various members of the Consulting Staff.

Residence of Patients.

The hospital register shows that of the 172 patients admitted during the period covered by this report, 44 resided in the city of Toronto and the remainder came from 72 different cities, towns and villages of Canada and the United States.

Following is a list of places from which patients have been received :

| | |
|------------------------------|-----------------------|
| Barrie. | Mount Forest. |
| Beeton. | Mount Pleasant. |
| Belleville. | Newburg. |
| Big Lake, Manitoulin Island. | Newcastle. |
| Blake. | New Lowell. |
| Brampton. | Niagara Falls. |
| Braemer. | Norwood. |
| Brockville. | Oakville. |
| Bright. | Ottawa. |
| Brunner. | Pakenham. |
| Brussels. | Peterborough. |
| Buffalo, N.Y., U.S. | Pickering. |
| Calgary, Alta., N.W.T. | Port Dover. |
| Campbellford. | Port Perry. |
| Cobble Hill. | Ravenscliffe. |
| Colborne. | Red Bay. |
| Collingwood. | Regina, Assa., N.W.T. |
| Deloraine, Manitoba. | Renfrew. |
| Derwent. | Rodney. |
| Deseronto. | Roland. |
| Drumquin. | Stamford. |
| Dunnville. | Stanwood. |
| Elma. | St. Thomas. |
| Evelyn. | Stouffville. |
| Fernhill. | Stratford. |
| Forest. | Tamworth. |
| Hamilton. | Toronto. |
| Hanover. | Toronto Junction. |
| Jessopville. | Trowbridge. |
| Lindsay. | Vandeleur. |
| Little Britain. | Wheatley. |
| London. | Winnipeg. |
| Manilla. | Woodbridge. |
| Maxville. | Woodstock. |
| Meadville, Pa., U.S. | Yonge Mills. |
| Mimico. | Young's Point. |
| Moose Jaw, Assa., N.W.T. | |

TRAINING SCHOOL FOR NURSES.

A considerable number of applications have already been received for admission to the training school for nurses in connection with the hospital, but of course only a limited number of applicants could be accepted.

The school is in full operation, under the able superintendency of Miss L. E. Applegath.

Owing to the limited number admitted to the school and to the relatively large amount of surgical work done in the hospital, the opportunities for practical acquaintance with the technique of surgical nursing and preparation for operations are exceptionally large. The disadvantages of a comparatively limited field are, of course, realized, but efforts are being made to reduce this to a minimum; and as the course of training insisted upon is only two years, the graduates will be encouraged to spend a third year in post-graduate work in some general hospital. The first graduates will receive their diplomas early in 1901.

Owing to all the available space in the hospital being required for patients, the rooms set apart for the Lady Superintendent and the nurses are much less commodious and comfortable than these faithful women deserve. A Nurses' Home, sufficient to meet all the needs of the hospital for many years to come, could be provided at comparatively small cost, and the Trustees hope that means will be found to enable them to furnish a comfortable and home-like place where the nurses can spend pleasantly their well-deserved hours of rest and recreation.

DONATIONS.

During the year the Lady Superintendent received many donations of flowers, fruit, etc., for the use of the patients. Some toys were also sent in for the children, while a large and well arranged scrap-book, contributed by Master Fred. Greenwood, of Grimsby, was much appreciated. Mention should also be made of two orchestral concerts which were kindly given for the entertainment of patients by Mr. Geo. Temple, assisted by several of his musical friends.

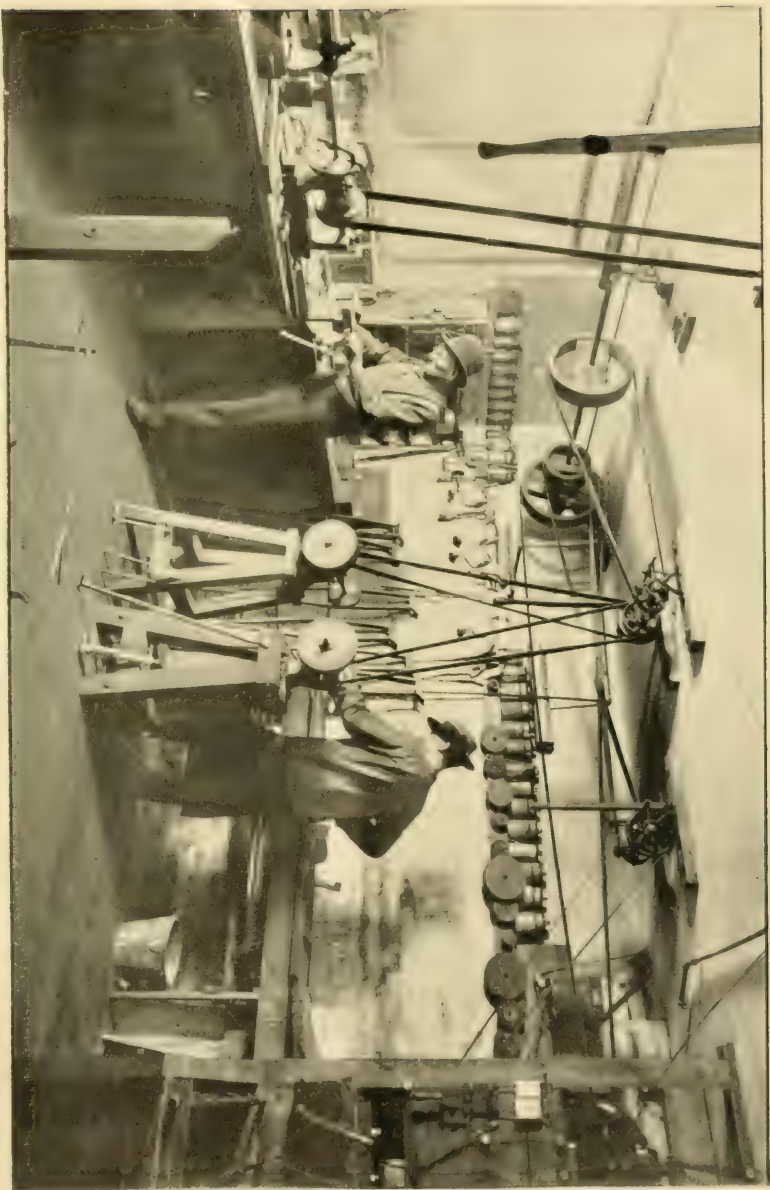
Cash Donations.

| | |
|---|--------|
| Miss A. L. Sanderson, 299 Huron Street | \$1 00 |
| Mr. A. F. McDonald, 139 Isabella Street | 1 00 |
| Mr. W. E. Cobban, 31 Howard Street | 0 25 |
| Mrs. A. Carey, 80 Baldwin Street | 0 25 |
| Miss M. I. Scott, 126 Huntley Street | 0 25 |
| " J. B. Griffin, 49 Yorkville Avenue | 0 25 |
| " M. J. Keown, 96 Charles Street | 0 50 |
| " L. M. Currie, 90 Gerrard Street E. | 0 50 |
| " I. F. McKim, 25 Grosvenor Street | 0 25 |
| " R. F. Blaney, 27 Howland Avenue | 0 25 |
| " C. F. Jackson, 17 Alexander Street | 0 25 |
| " J. Smythe, 18 Elm Street | 0 25 |
| " S. E. A. Scobie, 103 Maitland Street | 0 25 |
| " M. Gunn, 78 College Street | 0 25 |
| " R. Thompson, 16 Grosvenor Street | 0 25 |
| " E. Holden, Huntley and Linden Streets | 0 25 |
| " G. Wier, 123 Markham Street | 0 25 |
| Mr. Alex. Sampson, 141 Beverley Street | 0 25 |
| Mrs. Alex. Sampson, 141 Beverley Street | 0 25 |
| Miss Alice Sampson, 141 Beverley Street | 0 10 |

| | |
|--|----------|
| Master Gordon Sampson, 141 Beverley Street | \$0 10 |
| Mrs. John Pugsley, 137 Bloor Street West..... | 0 50 |
| Mrs. Andrew, 55 Huntley Street..... | 0 30 |
| Mrs. Andrew's five children | 0 50 |
| Mrs. C. M. Hughes, 230 McCaul Street | 0 25 |
| A friend | 0 25 |
| Miss Edna Fortier, 57 Murray Street..... | 0 25 |
| Mr. Wm. Bailey, 87 West Bloor Street | 0 25 |
| Mrs. J. McEwen, 35 Breadalbane Street..... | 0 25 |
| Mrs. Murdock, 35 Murray Street | 0 25 |
| Miss S. E. Hagarty, 31 Harbord Street | 0 25 |
| | <hr/> |
| | \$10 00* |
| City Relief Society, per Mrs. Hayes | 2 00† |
| Ladies' Aid Society, Westminster Presbyterian Church | 7 50† |
| Union C. E. Society, Blenheim, per Jas. M. McLaren, pastor Presbyterian Church..... | 2 50 |
| Mrs. (Dr.) Gardiner, 393 William Street, London, Ont. | 25 00 |
| | <hr/> |
| | \$47 00 |

* This amount was collected by a member of the Ladies' Committee to provide an appliance for a special case.

† Contributed to the Appliance Fund for special cases.



MACHINE SHOP, TORONTO ORTHOPEDIC HOSPITAL.



LEATHER SHOP, TORONTO ORTHOPEDIC HOSPITAL.

Toronto Orthopedic Hospital.

General Information regarding the Hospital and its Equipment.
Rules and Regulations.

History.

The Toronto Orthopedic Hospital is the only institution in Canada devoted exclusively to the treatment of the lame, crippled and deformed. Hospitals set apart for this special work have long been fully recognized as a necessity in Great Britain and the United States, but until July, 1898, there was no place in the Dominion of Canada devoted to this work alone. On July 1st, 1898, the Toronto Orthopedic Hospital began its career, and, although patients were at once admitted, it was four months later before the work of organization was completed, and the Board of Trustees took formal possession on the first of November following. From the outset the hospital possessed the special equipment necessary for efficiently carrying on its work, but during the first year was considerably hampered by insufficient ward accommodation, the number of beds available during this time being only twelve. When the hospital was opened it was thought that, with careful management, this number would be ample for a beginning, as a considerable number of the cases treated require to remain only a few days at a time.

Very soon, however, the number of patients applying for admission completely overtaxed the available accommodation, and it became necessary at times to keep persons desiring treatment waiting for several weeks. The necessity for larger quarters finally became imperative, and in September, 1899, the trustees acquired control of additional property by which the capacity of the institution was more than doubled. Already, however, there are indications that still further provision will have to be made in the near future.

Location.

The hospital property is pleasantly situated on one of the best residential streets in Toronto, and the large lawn at the disposal of the patients who are well enough to be out of doors part of the time is much appreciated during the summer season. Being within fifty yards of the Yonge Street line of street railway, which runs directly into the Union Railroad Depot, the hospital can be conveniently reached in twenty minutes by patients coming from outside places. The fact that the Belt Line of street railway passes the door makes the location chosen for the hospital additionally desirable.

Necessity for a Special Hospital.

In some minds there may arise doubt as to the necessity of a hospital devoted exclusively to the treatment of deformed and crippled persons. There is, however, general agreement among those most competent to judge that the whole field of orthopedic surgery cannot be adequately covered in general medical and surgical practice. The

hospital has no desire to encroach upon the work of general hospitals or general practitioners, and does not seek the patronage of cases that can be treated as well by the family physician as by the specialist. But to be convinced that there are multitudes of orthopedic cases which have never been adequately provided for in Canada, it is only necessary to keep one's eyes open and see the numbers of lame, crippled and deformed persons to be found in every community—persons who in many instances have long abandoned any hope of relief, because they have often been assured that their condition was incurable. In almost every village are to be found men and women who have been allowed to grow up with club-feet, or who have been left disabled as a result of paralysis or chronic joint disease occurring in early life. The relief of such conditions in grown persons is almost never attempted except in institutions devoted solely to this work, and the patients themselves are apt to be incredulous when told that they may be benefited; yet there is abundant evidence that the resources of modern orthopedic surgery are equal to the satisfactory correction of the severest cases of club-feet, no matter what the age of the patient, and that many of the most distressing disabilities resulting from infantile paralysis and diseases and injuries of joints may be at least greatly improved.

But the best obtainable results can be secured only as a consequence of wide experience and by means of special equipment; the former is practically impossible without specializing this branch of surgery, and the latter is useless except in conjunction with the former. For while the aggregate number of orthopedic cases is large, relatively

these cases are rare. Realizing this, many of the most skilful physicians and surgeons refuse to treat orthopedic cases, preferring to refer their patients so afflicted to surgeons who give their whole attention to this work. A large majority of the patients thus far treated in the Toronto Orthopedic Hospital have come on the advice of the family physician.

Mechanical Department.

Besides primary operative surgical treatment, many orthopedic cases require skilful after-treatment by means of mechanical appliances, and numerous cases need scientific mechanical treatment alone. But the full possibilities of mechanical treatment can be realized only by having the mechanics who make the appliances directly under the supervision of the surgeons who prescribe them, and in the Toronto Orthopedic Hospital this requirement is met by having all the apparatus required manufactured on the premises in well-equipped shops by mechanics who have been specially trained to this work, the surgeons assuming the responsibility of taking measurements, designing the appliances and supervising the manufacture.

Orthopedic Gymnastics.

There are certain conditions, such as lateral curvature of the spine, round shoulders, flat foot, relaxation of joints from muscular weakness and paralysis, deformity and imperfect development of the chest due to rapid growth, or resulting from disease in early life, that can be much more satisfactorily managed by developmental methods and or-

thopedic gymnastics than by any other plan of treatment which has yet been proposed. Until a few years ago these cases, if treated at all, had shoulder-straps, braces, and various other mechanical devices prescribed for them; and even yet such means are often resorted to, owing to the fact that the attention of the profession has never yet been strongly enough directed to the possibilities of scientific gymnastic and developmental treatment. It is quite true, however, that the experience of the past decade has abundantly demonstrated the incomparable superiority, in suitable cases of the class just referred to, of the treatment by means of orthopedic gymnastics.

The final results of this method of treatment are often particularly gratifying because the benefit is not limited to the local condition; incidentally, the general health of the patient is often greatly improved by the course of physical training.

This, however, is a department of orthopedic practice which especially demands skill and experience, for this means of treatment, infinitely valuable in properly selected cases, is useless, or even capable of great harm, if unwisely employed.

A careful distinction must be made between ordinary calisthenic or gymnastic work and scientifically employed orthopedic gymnastics. The former may benefit the general health and improve development, but will do little or nothing towards improving bodily deformities. Most of the patients for whom gymnastic treatment may be suitably prescribed require *corrective force* as well as orthopedic gymnastics. Great discretion and exact diagnosis are indispensable. Developmental methods may be of the greatest benefit in

lateral curvature of the spine; but, on the other hand, this treatment might do untold harm if employed in certain stages of spinal deformity due to disease of the bones. To meet the requirements of this important work the Toronto Orthopedic Hospital is provided with a gymnasium fitted up for this special purpose, and the best skilled assistance obtainable is employed.

Operating Room.

The operating room is so arranged as to have abundance of light, no matter how dull the day. It is furnished and equipped in such a manner as to meet fully the exacting demands of modern aseptic and antiseptic surgery.

ADMISSION OF PATIENTS.

The hospital is strictly undenominational. Persons of all ages who are lame, crippled or deformed, or suffering from any of the diseases which come within the province of orthopedic surgery, are eligible for admission to the hospital. Cases of a general medical or surgical character will not be received, as these are fully provided for by the various general hospitals.

Private Patients.

A number of private and semi-private rooms are available for patients who want such accommodation. As it is desirable that the hospital shall be as home-like as possible, arrangements can be made, when necessary, for mothers or guardians to remain with children occupying private rooms.

Public Patients.

The charge for public patients is 40 cents per day. The hospital is not simply a local institution for the benefit of Toronto residents only, but is open to all who need the service it can render, irrespective of place of residence. Any municipality, corporation, society or individual, can send patients for treatment in the public wards by paying the above sum. It should be remembered, however, that this amount does not pay the actual cost of maintenance and nursing, consequently patients who desire the use of public beds must furnish satisfactory evidence that they are unable to pay for treatment.

Provision for the Destitute Poor.

It is the desire and intention of the Trustees that all the resources of the hospital shall be available to the poor as well as to those more fortunately circumstanced. To this end really destitute patients will be gladly received and treated with every kindness and consideration, absolutely free of expense for maintenance and nursing and medical treatment. In exceptional cases even necessary orthopedic appliances will be supplied free.

It is high time, however, that public attention should be directed to the subject of hospital abuse. The frequency with which hospital charity is sought by persons who are able to pay their way has become a scandal in nearly all large cities, and public beds in almost every hospital are occupied only too frequently by well-to-do-patients who are willing to be regarded as subjects of charity simply to escape paying the legitimate fees of their regular medical adviser. The injustice to the public of this condition of things is apparent when it is remembered how largely

hospitals are supported by bequests and public subscriptions. It is also most unjust to the medical profession, for the men who so freely give their time and their best service to the unfortunate poor in the public wards of the various hospitals should not be expected to serve without remuneration those who have no legitimate claim to charity.

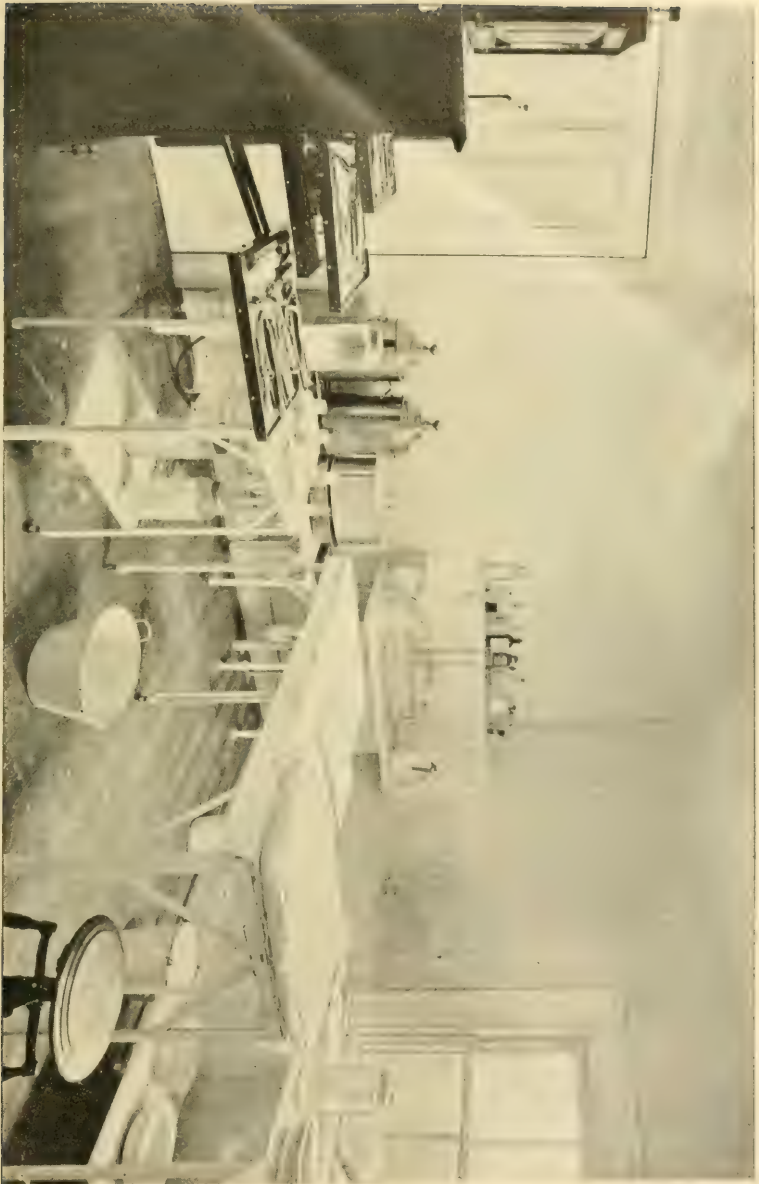
It is to be feared that this pauperizing practice is sometimes fostered by the hospitals themselves, no systematic and careful effort being made by those in charge to ascertain whether persons desiring treatment as public patients are really destitute or in poor circumstances.

From the outset it has been the purpose of the Trustees and Staff of the Toronto Orthopedic Hospital to place all the advantages of the institution at the command of the worthy poor; but, at the same time, to prevent, as far as possible, imposition upon its charitable resources. It is not unlikely that this policy will interfere somewhat with the number treated from year to year: but as a matter of justice and of right it will be consistently adhered to. Consequently, while the hospital is prepared to receive the needy with a warm welcome, it is hoped that the medical profession and the public will co-operate with the Trustees and Staff in the effort to restrict the charitable work of the institution to the sufficiently large unfortunate class who are justly entitled to receive public assistance.

Out-patient Department.

The Out-patient Department provides for the treatment of such cases among the worthy poor who apply to the hospital as can be properly dealt with outside of its wards.

This department is open from 1 to 3 p.m. every Monday and Thursday.



OPERATING ROOM, TORONTO ORTHOPEDIC HOSPITAL.



A SEMI-PRIVATE WARD, TORONTO ORTHOPEDIC HOSPITAL.

The Consulting Staff.

Ailments other than orthopedic, from which patients who come to the hospital may happen to be suffering, will be treated only under the direction of the family physician or some member of the consulting staff, as the practice of the active surgical staff is limited strictly to orthopedic surgery.

Donations and Bequests.

The Toronto Orthopedic Hospital is an incorporated provincial institution, under Government supervision, and can legally receive donations and bequests of any amount. Money thus contributed helps to place the benefits of the hospital at the command of the deserving poor, and as the special advantages of the institution are being sought more and more largely by all classes, the demands upon its charitable resources are constantly increasing.

The medical profession is ever willing to serve without reward those who are unable to pay for treatment, but it is impossible for medical men to provide board and skilled nursing for the poor in addition to free professional treatment, hence the need of having what are known as "public wards" in hospitals. At one time, indeed, hospitals were devoted almost entirely to the nursing and care of the poor, and while this condition of things has gradually changed so that now large numbers of well-to-do persons prefer to be treated in the private wards of a hospital rather than in their own homes, especially when their ailments are surgical, it still remains true that these institutions must be prepared to receive and tenderly care for destitute patients who would otherwise be unprovided for. The doors of

the Toronto Orthopedic Hospital are open to the poor as well as to the rich, and while no urgent appeals are made for public subscriptions to assist in carrying on the charitable side of its work, the contributions of those who desire to lend a helping hand to the crippled and deformed among the poor are always welcome, and money thus given will be most carefully used by the Trustees in the interest of the class for whom it is contributed. No amount is too small to be of some service in this worthy work. Anyone desiring to contribute a large amount for a special purpose, such as furnishing a bed, endowing a bed or providing a special hospital cottage, has the privilege of specifying the purpose for which the donation shall be used.

The amount required to provide and fully furnish a bed in the hospital is \$50.00. Anyone donating this amount to this fund will have the privilege of naming the bed, the name to be permanently inscribed upon it.

The amount necessary to endow a bed in perpetuity is \$2,500. Beds so endowed shall be suitably inscribed, as desired by the donors, and are set apart for the exclusive use of the deserving poor. A donor shall have the right to send any poor patient to occupy such endowed bed free.

FORM OF BEQUEST.

I give, devise and bequeath to The Toronto Orthopedic Hospital the sum of Dollars.

Further particulars regarding donations and bequests will be found in this pamphlet.

RULES AND REGULATIONS.

RULES FOR PATIENTS.

1. Unless otherwise ordered by the attending surgeons, every patient on admission to the hospital shall have a bath.

2. No patient shall leave the hospital nor the ward to which he or she has been assigned without permission from the Lady Superintendent.

3. Patients are not permitted to go into the kitchen or the basement of the hospital, nor to stand around the front doors or main halls.

4. In suitable weather such patients as are well enough to go out will be encouraged to make use of the grounds behind the hospital; but for obvious reasons must not go upon the front lawn, which is in full view from the street.

5. Smoking upon the premises is positively forbidden.

6. No article of food or drink shall be received by any patient from friends without the approval of the Lady Superintendent.

7. Patients must cheerfully obey the nurses.

RULES FOR VISITORS.

1. Clergymen of all denominations shall have free access to the hospital wards; but no patient shall be constrained to hear any religious service or reading contrary to his or her desire.

2. Visitors will be admitted to see private and semi-private patients every day from 2 to 4 p.m. Patients in public wards may be visited on Tuesday, Thursday and Saturday, from 2 to 4 p.m. *Visitors will please retire promptly and quietly when the bell rings.*

3. Visitors must cheerfully yield to the judgment of the surgeons or the Lady Superintendent, should they at any time temporarily refuse permission to see any patient whom they consider too ill to be visited.

4. Fruit or luxuries of any kind brought by visitors must not be given directly to patients, but shall be placed in charge of the Lady Superintendent, who shall distribute them at her discretion.

5. Visitors, while in the wards are forbidden to discuss matters relating to the treatment of patients or the management of the hospital; but patients and their friends are requested to report immediately to the Lady Superintendent, or the attending surgeons any inattention or neglect.

6. No visitor shall come to the Hospital who has been recently in contact with any contagious disease, such as diphtheria, small-pox, scarlet fever, measles, whooping cough or chicken-pox. Any violation of this rule will be reported to the Medical Health Officer of the City of Toronto.

